

Jim Doyle
Governor

Helene Nelson
Secretary



State of Wisconsin

Department of Health and Family Services

DIVISION OF PUBLIC HEALTH

1 WEST WILSON STREET
P O BOX 2659
MADISON WI 53701-2659

608-266-1251
FAX: 608-267-2832
www.dhfs.state.wi.us

HI-LIGHTS AND SIRENS

Memo Series 05-12

July 2005

TO: Ambulance Service Providers
Ambulance Service Medical Directors
EMS Training Centers
First Responder Organizations
EMS Coordinators
EMS Advisory Board
Emergency Physicians Advisory Committee

FROM: Bureau of Local Health Support and EMS
Wisconsin Emergency Medical Services Systems Section

RE: Miscellaneous Updates

NEW STAFF AT THE EMS OFFICE

Dan Williams is the Chief of EMS for the EMS Section within the Division of Public Health. Dan has been involved in EMS in Wisconsin for over 30 years and has been a licensed Paramedic since 1978. You can contact Dan by phone at (608) 261-6870 or email him at willidp@dhfs.state.wi.us.

Cathy Etter has been hired as the Paramedic Coordinator for the EMS Section. Cathy is a Paramedic and Registered Nurse. Please contact Cathy by phone at (608) 266-8853 or by email at ettercd@dhfs.state.wi.us.

Brian Litza has been hired as the IV-Tech/Intermediate Coordinator for the Section. Brian is a Paramedic and has been involved in EMS for years and is well qualified in street and educational issues. Contact Brian by phone at (608) 266-0471 or by email at litzabd@dhfs.state.wi.us.



Contact these or any of our other staff should you find the need. Staff listings and areas of expertise can be found on our website at <http://dhfs.wisconsin.gov/ems/>.





FIRST RESPONDER AND EMERGENCY MEDICAL TECHNICIAN LICENSING REMINDERS

For Services: Services should review their rosters to make certain that all of the FR/EMTs on the roster are active. EMTs are not authorized to run with your service until the license is in “active” status with an “issue” date. Contact the EMS Office if you have any questions about license statuses.

Prior to adding a new FR/EMT to the service roster, you must have a fully completed and signed application from the FR/EMT. When entering the FR/EMTs answers to the criminal history and driver record questions into EMSS, enter the answers exactly as the FR/EMT answered them on his/her application. Do not enter “yes” to merely signify the question was answered. Once you have added the EMT to the services’ roster, the completed application must be sent to the EMS office.

For Individuals: The EMS office often hears from FR/EMTs who mistakenly believe their licenses have automatically been renewed by merely completing a refresher course. Renewal of an EMT license requires more than just taking a refresher course. It also requires a completed renewal application, current CPR (Intermediates and Paramedics are also required to hold current ACLS) as well as having no substantially related conviction history or driver offenses. An expired license may be renewed up to 1 year after expiration (“late renewal”) by meeting the renewal requirements. Per Wisconsin Administrative Code, once an EMT license is expired more than 1 year (“reinstatement of a lapsed license”), additional requirements must be met prior to reinstatement even though a refresher course has been completed during the biennium. The allotted time to renew once a license expires begins with the expiration of the license, not with the date of the refresher. FR/EMTs whose last license expired on June 30, 2004, had until June 30, 2005, to apply for late renewal. Any individual applying on or after July 1, 2005, has an additional 2 years to reinstate the license by meeting the reinstatement rules, including successful completion of the written and practical certification exams at the appropriate level. Once a license has been expired for 3 years or more, a full EMT course must be completed prior to licensure.

If you have any questions or concerns, please contact the EMS Office for assistance or additional information.

FIRST RESPONDER CERTIFICATION AND EMERGENCY MEDICAL TECHNICIAN LICENSE APPLICATIONS

The applications for all levels of certification/licensure were updated in May 2004. **Please discard all obsolete applications and begin using only the updated applications dated “Rev. 5/04”.** Applications forms are available on our website at <http://www.dhfs.wi.gov/ems/forms/index.htm>.

DPH 07477 - First Responder Certificate/Emergency Medical Technician License Application. This form should be used by all first time applicants applying for a First Responder certificate as well as by applicants applying for all levels of EMT licensure. This form should also be used when upgrading to a higher level of licensure, such as a Basic upgrading to a Paramedic, etc.



DPH 07478 - First Responder/Emergency Medical Technician Application Electronic Addition to a Roster. This application should be used to electronically add an applicant who already holds a current First Responder certificate or EMT license to your roster using the Emergency Medical Services System (EMSS). Do not add an EMT to your roster without a completed and fully signed application. Once the applicant is added to your roster, the application must be sent to the State EMS Office.

SIGN UP FOR EMERGENCY MEDICAL SERVICES SYSTEM (EMSS) LICENSING DATABASE

Have you signed up and registered to use the EMSS database for licensing? If not, we encourage all ambulance and first responder services to get registered to use the database.

Self-Registration has two parts and is required prior to granting you permission to access EMSS.

It is important to have a valid unique e-mail address to self-register for a Wisconsin login account. You will be receiving correspondence and updates from our office as well as correspondence regarding your Wisconsin User ID, password or other information about your Wisconsin Login account to the e-mail address provided.

SELF-REGISTRATION allows you to create your personal Wisconsin Login Account.

Step one: Access the Internet at <https://on.wisconsin.gov>

- Select Self-Registration
- Request a User ID and Password
- Confirmation e-mail will be sent immediately which will contain a web link to the account activation page.

Step two: Activating your Account

- Click the Web link in your confirmation e-mail, taking you to the Account Activation page.
- You will log in using your new Wisconsin User ID and Password to activate your account.
- Contact stoffnj@dhfs.state.wi.us to advise that self-registration has been completed. Once self-registration has been completed there is a mapping process which links the associate to the organization. Do not attempt to access your account until you receive authorization from our office indicating your account set-up is complete and you may access EMSS.

If you have questions or need assistance, please feel free to contact Norah Stofflet at 608/266-0473 or e-mail stoffnj@dhfs.state.wi.us. The Wisconsin Help desk may be reached at 608/261-4400 (local) or 866/335-2180 (toll-free) for assistance.



IMPORTANT INFORMATION FOR ALL EMSS USERS

Should you change your email address, it is important to update the address on the Wisconsin Access Management System (WAMS), as you need to have a valid email address that allows you to access the Emergency Medical Services (EMSS) licensing database. The EMS office uses the email address in WAMS to send out correspondence and other updates. If you do not keep your email address current, you may be missing out on valuable information.

To update information related to your EMSS user account, go to <https://on.wisconsin.gov> and select:

- **Profile Management**

Allows you to update and change your account information, e-mail address, password and other information. It is also important to save your User ID, password and secret answer to your question in a secure location.

- **Account Recovery**

Restores access to your account if you can not remember your password or your Wisconsin User ID. You must know the answer to your secret question and you must have access to the email address in your account. A link provided in e-mail is used to continue account recovery. Be sure to write down and save any changes you make in a secure location.

If you need assistance or additional information, please feel free to contact Norah Stofflet at 608/266-0473 or e-mail stoffnj@dhfs.state.wi.us. The Wisconsin Help desk may be reached at 608/261-4400 (local) or 866/335-2180 (toll-free) for assistance.

LICENSE RECIPROCITY

Important information regarding reciprocity is available on the Wisconsin EMS web site at <http://www.dhfs.wi.gov/ems/system/Reciprocity.htm>. Persons applying for a Wisconsin EMT license while holding a valid EMT license from another state should review this document for the necessary forms and information that must be submitted when applying for a Wisconsin EMT license on the basis of reciprocity.

WISCONSIN TRAUMA CARE SYSTEM UPDATE

On January 1, 2005 the Trauma System Administrative Rules, HFS 118 went into effect. Included in these rules is the requirement for each EMS and First Responder service to join the appropriate Regional Trauma Advisory Council (RTAC) by July 2005. If you have any questions contact Marianne Peck, State Trauma Coordinator at 608-266-0601 or email at peckme@dhfs.state.wi.us. Further information on the Wisconsin Trauma Care System, Trauma Care Facility Classification/Designation of Wisconsin Hospitals, and RTAC's can be found at http://www.dhfs.wi.gov/ems/system/Trauma_System_Index.htm.



CPAP, CAN EVERYONE DO IT???

Continuous Positive Airway Pressure (CPAP) use for the EMT-Basic providers is currently under a pilot project evaluation by the EMS Section and is not allowed to be performed by any EMT-Basic service that has not received written confirmation of acceptance into that pilot project. It is anticipated that the pilot will be under review this year and may then be approved for general use at the EMT-Basic levels of care. At this time only those EMT-Basic services enrolled in the pilot project are authorized to use this skill. Others will be in violation of the scope of practice for EMTs-Basic. Training Centers should not be instructing this as a general skill in any EMT-Basic or Basic refresher class unless the participants in the class are with a service that has written acceptance into the pilot project.

An important component of the State's CPAP Project is data collection. As recommended by the Physician Advisory Committee (PAC), the Department has requested that all **EMT-Intermediate (99) and EMT-Paramedic services** that are utilizing CPAP submit the standard data collection information and associated run sheet until December 31, 2005. The data reporting form must be submitted to the Section within 30 days of the ambulance run.

By applying to be in the pilot program, those services at the EMT-Basic, EMT-Basic IV Tech and EMT-Provisional Intermediate level of service have agreed to the following:

1. To provide CPAP 24 hours/day and 7 days/week while completing the CPAP
2. To use only the Department approved curriculum for training the services' EMTs in the use of CPAP in the pre-hospital setting.
3. The EMTs licensed with this service will follow the state-approved protocol for the use of CPAP in the pre-hospital setting.
4. **A quality assurance form will be completed for each ambulance run on which CPAP is used. Completed quality assurance forms will be submitted to the DPH, EMS Section office monthly along with a copy of the associated run report or patient care record.**
5. Provide the Bureau with the total number, including those for whom CPAP was not used, of patients transported in respiratory distress during the project period including their age and gender.
6. The Medical Director and Service Director will notify the Division of Public Health, Bureau of EMS and Injury Prevention immediately should the ambulance service provider choose not to continue to participate in the project.

AMBULANCE RUN REPORT COPIES

There have been many inquiries recently regarding run report documentation. At issue is the question of who keeps the original copy of the run report. There is no statute or rule regarding this issue. Since the original is the legal document that would be requested by insurance or legal council if needed, we feel it prudent that the ambulance service provider keep the original (or white) copy. A copy of the report needs to be given to the receiving hospital. The pink or yellow copy can be left there. If you need further clarification you should contact your billing department, billing service, or legal council.



FIRST RESPONDER RULE HFS 113

The long awaited changes to HFS 113 have finally arrived. On June 6, 2005 The Department of Health and Family Services invoked emergency rule proceedings for HFS 113. Until now first responders have been restricted to defibrillation available to aid in life threatening emergencies. The amended rules are being published by emergency order to allow first responders to use the following two potentially life-saving skills:

1. Non-visualized airway to treat patients who are either not breathing or have airway compromise due to trauma or other means; and
2. Administration of epinephrine by auto-injector for patients who have suffered a severe allergic reaction.

The emergency rule status affords the immediate implementation of these skills and the potential to save more lives. The emergency rule will afford validation of the rule for a short time until the rule can go through the formal process to make the changes permanent. The rule presents an opportunity for change and proposes additional requirements for first responders and their services. Other skills included in the rule for First Responders are those of oxygen administration, defibrillation with AED, back boarding for spinal immobilization and application of cervical collars. The Department recognizes that some first responders have been previously trained in these skills but this now validates their practice.

The Department requires that any first responder groups currently using these skills submit protocols for these to the Department. A first responder group not currently using these skills may incorporate them by submitting a copy of the signed protocols along with a cover letter from the medical director. The service director, medical director and training center must assure that the first responders are trained in all the skills they will be using to practice. Tracking of individual skills must be maintained by the service and verification available upon request from the department.

EMT IV TECH EXAM QUESTION HELP

The EMS Section is in the process of redesigning the IV Tech written exam. In order to validate the questions we need to do a trial of the questions. We invite you to help us make this exam better. We are asking EMT-Basics (licensed within the last 6 months) and IV-Techs (licensed within the last 12 months) to take a 110 question exam. The exam is anonymous and will take no more that 3 hours to complete. You will not receive any feedback regarding a grade because we are examining the items not your performance. ***This is your opportunity to participate and make EMS better in Wisconsin.***

The list of exams and their locations follows. All trial sessions will start at 6:00 PM and end by 9:00 PM. Please e-mail Brian Litza at litzabd@dhfs.state.wi.us should you have any questions.

DATE	PLACE	ADDRESS
Tuesday, July 12, 2005	Chippewa Valley Technical College	620 W. Clairemont Avenue, Eau Claire
Wednesday, July 13, 2005	North Central Technical College	1000 W. Campus Drive, Wausau
Thursday, July 14, 2005	North Eastern Technical College	2740 West Mason Street, Green Bay
Monday, July 18, 2005	Madison Area Technical College	2125 Commercial Ave, Madison



EMS COMMUNICATIONS

EMS service providers and hospitals frequently ask about state communications systems requirements for EMS.

Four channels are required for all mobile units that provide EMS patient transport: State EMS, State ALS, Marc1, and Marc2. First responders units that do not provide transport services are strongly urged to maintain these channels as well.

Additionally, all hospitals must, at a minimum, have the ability to communicate on the statewide EMS channel. The statewide ALS and State Coordination channels are also recommended.

To understand the system, one must consider the overall public safety communications picture in our state, and the heightened emphasis on interoperability and mass event planning.

There are several types of EMS communication stakeholders involved:

- Over 130 hospitals provide medical control and coordination.
- Over 750 EMS service providers depend on pre hospital EMS radio communications to provide service to their communities.
- Over 1,100 ambulances statewide are required by the State EMS Communications Plan and state administrative code to be equipped with and maintain radio communications.
- Over 15,000 licensed EMTs in our state depend on pre-hospital EMS communications to treat patients and save lives.

State requirements do not mandate the communications systems to be used to support EMS operations' in your jurisdictions. These requirements bolster interoperability and redundancy by maintaining that all ambulances and hospitals have the ability to communicate via two-way radio on the VHF EMS mutual aid channels.

There are common challenges ahead in public safety communications. New technologies, wireless issues, interoperability, etc. and many more issues are at our doorstep. Paul Wittkamp, State EMS Communications Coordinator, is available to consult with dispatchers and other officials on communications issues along with future plans and goals for emergency medical dispatch (EMD) and pre-arrival instruction. Contact Paul at wittkp@dhfs.state.wi.us.